

B CLAIMS ONLY							Application Number 10/016844		Filing Date				
							Applicant(s)						
							* May be used for additional claims or amendments						
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT								
	Indep	Depend	Indep	Depend	Indep	Depend		Indep	Depend	Indep	Depend	Indep	Depend
1	1							51					
2								52					
3								53					
4								54					
5								55					
6								56					
7								57					
8	1							58					
9								59					
10								60					
11								61					
12								62					
13								63					
14								64					
15								65					
16								66					
17								67					
18								68					
19								69					
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21								71					
22								72					
23								73					
24								74					
25								75					
26								76					
27								77					
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31								81					
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38								88					
39								89					
40								90					
41								91					
42								92					
43								93					
44								94					
45								95					
46								96					
47								97					
48								98					
49								99					
50								100					
Total Indep	3							Total Indep					
Total Depend	6							Total Depend					
Total Claims	9							Total Claims					